

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO	DATE
FEE DETERMINATION	HC		8-7-01
O.I.P.E. CLASSIFIER		QJ	6-13-01
FORMALITY REVIEW	BZ	TC3-883 105	09-18-01 111101
RESPONSE FORMALITY REVIEW	m.		

INDEX OF CLAIMS

<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Rejected Allowed (Through numeral)	N I A O	Non-elected Interference Appeal Objected

Claim	Final Original	Date	Claim	Final Original	Date	Claim	Final Original
1	102	9-12-02	13	51	5-17-02	101	
2	103		14	52	-	102	
3	104		15	53	-	103	
4	105		16	54	-	104	
5	106		17	55	-	105	
6	107		18	56	-	106	
7	108		19	57	-	107	
8	109		20	58	-	108	
9	110		21	59	-	109	
10	111		22	60	-	110	
11	111		23	61	✓	111	
12	112		24	62		112	
13	113		25	63		113	
14	114		26	64		114	
15	115		27	65		115	
16	116		28	66		116	
17	117		29	67		117	
18	118		30	68		118	
19	119		31	69		119	
20	120		32	70		120	
21	121		33	71		121	
22	122		34	72		122	
23	123		35	73		123	
24	124		36	74		124	
25	125		37	75		125	
26	126		38	76		126	
27	127		39	77		127	
28	128		40	78		128	
29	129		41	79		129	
30	130		42	80		130	
31	131		43	81		131	
32	132		44	82		132	
33	133		45	83		133	
34	134		46	84		134	
35	135		47	85		135	
36	136		48	86		136	
37	137		49	87		137	
38	138		50	88		138	
39	139		51	89		139	
40	140		52	90		140	
41	141		53	91		141	
42	142		54	92		142	
43	143		55	93		143	
44	144		56	94		144	
45	145		57	95		145	
46	146		58	96		146	
47	147		59	97		147	
48	148		60	98		148	
49	149		61	99		149	
50	150		62	100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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